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APPLICANTS

Stephen Venditti, Norwood, MA;

William Olsen, Bridgewater, MA;
Sean Hegarty, Newton, MA;Christopher Twombly, Arlington, MA;** CONTINUING DATA *None Elek*** FOREIGN APPLICATIONS *None Elek*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after <i>Allowance</i>	MA	DRAWING 19	CLAIMS 45	CLAIMS 3
Verified and Acknowledged	<i>Henry</i> Examiner's Signature	Initials			

ADDRESS

Steven J. Henry
 Wolf, Greenfield & Sacks, P.C.
 600 Atlantic Avenue
 Boston, MA
 02210

TITLE

Data access and retrieval mechanism

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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